

Obituary

DR RICHARD ROBERT WILLCOX, MD, FRCP

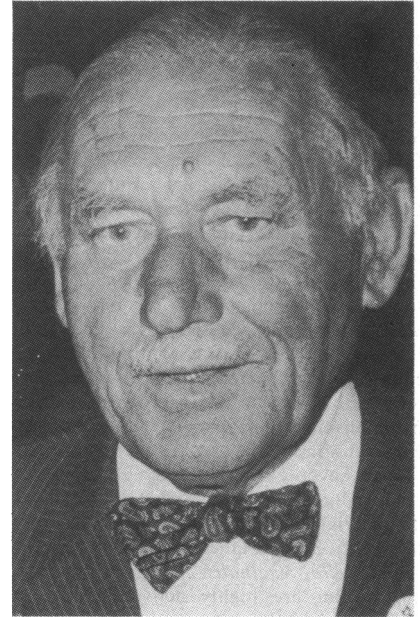
Richard (Dick) Willcox died at the age of 72, a week before his 73rd birthday. Britain has lost an eminent venereologist; the World Health Organisation (WHO) has lost an honoured senior consultant; his colleagues have lost a great promoter of international medicine; and his family have lost a beloved husband, father, and grandfather.

Dick Willcox went to St Mary's Hospital to study medicine in 1931 and pursued a successful and distinguished career. Sir William Willcox, his uncle, was senior physician at St Mary's, and his son and grandson, as well as Dick Willcox's own son, were in due course to become associated with the hospital in their medical careers. During the war Dick Willcox married Sadie Caffery, sister of Alexandra ward of St Mary's. He continued the family tradition of attachment to the hospital for most of his life. Indeed, loyal attachment to family and friends, steadfastness of purpose, and allegiance to institutions with which he came to be associated, were the prime traits of Dick Willcox's character. Tribute was paid to his national achievements when he retired from St Mary's in 1980 to become consultant at Edward VII Hospital, Windsor, and also in the recent obituary in the *Lancet* (1985;ii:902-3). A memorial service to honour him was held at St Mary's Hospital on 25 October 1985.

Dick Willcox became a pillar of support in the international advancement of venereology and the control of the treponematoses. As a venereologist to the British Army during the war, he made several visits to countries in Africa where sexually transmitted infections were a problem. The historic period of medicine began towards the end of the war (1943-53) when the unique effectiveness of aqueous penicillin by multiple injections was shown in early syphilis by J Mahoney and colleagues of the United States Public Health Service's clinic on Staten Island, New York, in neurosyphilis by T Dattner and E Thomas, in the "endemic syphilis" of childhood by E Grin, and in the other childhood treponematoses of yaws by C Findley and of pinta by E Varela and others. Dick Willcox was in early personal contact with these workers and with national and international programmes that developed in subsequent years in many different countries. As a senior WHO consultant and as lecturer or moderator at travelling

seminars, symposia, study groups, and similar international activities in many countries, such as Austria, Denmark, France, India, Italy, Japan Lebanon, Papua and New Guinea, Noumea, Sweden, Switzerland, Venezuela, and the USSR, Dick Willcox influenced and accelerated the replacement of toxic metal treatment by penicillin in combating venereal infections and the treponematoses. He became an important "catalyser" in the conversion process. At home he was for many years chairman of the British Clinical Co-operative Group to evaluate the long term outcome of treatment.

During a large scale field survey of genitourinary diseases for the government of Rhodesia in 1949 Dick Willcox discovered the non-sexual transmission of childhood njoverta and identified it with the endemic syphilis of Bosnia in Yugoslavia and the bejel of Syria, Iran, and Iraq. The introduction of long acting penicillin preparations, such as penicillin G, benzathine penicillin, and penicillin, oil beeswax, and the early experience with such single injection drugs in these scattered areas of endemic infection — and well as in pilot projects against rural yaws in the tropics and pinta in Mexico — showed that the chain of infection could be effectively severed, transmission stopped, and the disease perhaps eradicated by mass campaigns. In co-operation with colleagues from many countries in Europe and the United States of America, Dick Willcox came to play a key part in the development of mass campaigns sponsored by official international organisations, such as WHO, Pan American Health Organisation, United Nations Children's Fund, and the World Bank, as well as non-governmental organisations, such as the International Union against Venereal Infections and Treponematoses and the Fogarty International Center. In these campaigns in Africa, South East Asia, the western Pacific, and south and central America more than 25 million people had been treated with penicillin by 1975. As a member of the expert panel of venereal infections and treponematoses of the WHO, Dick Willcox was an active strategist at the first three international conferences (held in Thailand in 1952, in Nigeria in 1956, and in Washington, USA in 1984) as well as a series of regional symposia or seminars (held in Singapore in 1958, Manila, the Philippine Islands in 1962, and Noumea, New



Caledonia in 1978) and similar planning or follow up conferences.

Dr Richard Asher of essay fame once said "Aren't I lucky? I can write". Dick Willcox was also among the lucky ones. He wrote and published many scientific papers of quality and produced several thoughtful reports and assessments as a consultant or rapporteur at conference and meetings at home and abroad. His studies and investigations ranged from the effect of new antibiotics on genitourinary infections to articles on the life cycle of spirochaetes. When invited to present the Harrison Lecture in 1981, he gave an admirable overview of the international scene. He wrote chapters on sexually transmitted diseases in several books. With his son, Dr Jeremy Willcox (now a consultant venereologist in Devon), he wrote the first edition of *Venereological Medicine*, a textbook acclaimed at home and abroad.

Dick Willcox wrote of what he observed in patients and in the community, he wrote about what he thought and did and what should be done to improve the health of patients and their sexual contacts. We who knew him well as a friend and colleague will enjoy the legacy of his gifts. Let his love live on for his family and cherished garden at "Tideway" on the Thames, where his ashes were scattered. — TG